

ISSUE SLIP STAMP AREA (for additional cross references)

POSITIVE	INITIALS	ID NO.	DATE
PBS DETERMINATION			
O.P.E. CLASSIFIER			11/1/67
FORMALITY REVIEW			

INDEX OF CLAIMS

Rejected
 Allowed
 (Through normal)
 Rejected
 N
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 A
 O
 Non-Selected
 Intermediate
 Appeal
 Collected

Date
 Claim
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 Claim
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 Claim

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If more than 150 claims or 10 actions
 staple additional sheet here

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Best Available Copy